



*Mission:* To improve public health in Maryland through education and advocacy *Vision:* Healthy Marylanders living in Healthy Communities

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**Bill HB28 / Pharmacists—Aids for the Cessation of Tobacco Product Use**

**Hearing Date: 1/20/2022**

**Committee: HGO**

**Position: SUPPORT**

Chairperson Pendergrass and members of the Health and Government Operations Committee: The Maryland Public Health Association would like to express support for **HB28**, sponsored by Delegates Bhandari and Lewis. This bill will authorize pharmacists to prescribe and dispense FDA-approved nicotine replacement therapy to aid in the cessation of the use of a tobacco product. Additionally, the Board of Pharmacy would develop regulations regarding pharmacist prescribing of tobacco cessation therapies, including a Board-approved training course and requirements for the pharmacist to refer the patient for additional care to their primary care provider.

While over 500,000 adult Marylanders currently use tobacco products, 2/3s reported a quit attempt in 2017. Unfortunately, only about 1/3 used effective nicotine cessation therapies (NRTs) to do so.<sup>i,ii</sup> Quit rates remain low, with estimates ranging from 6-10% of smokers reaching success.<sup>2</sup>

Nicotine replacement therapies are already available over the counter, but similar to certain drugs like Allegra and Claritin that are now available over the counter, without a prescription, they are very expensive (\$80-120/month). Currently, obtaining a prescription requires an appointment with a primary care provider, which may take weeks or even more. For those who are not already connected to care, this presents an additional hurdle to overcome. These waiting periods could present obstacles to obtaining effective tools to quit tobacco.

Pharmacists are highly trained practitioners, who already have permissions in Maryland to deliver vaccines and prescribe birth control with the appropriate additional training and allowances. Prescribing NRT so it is affordable to anyone who is attempting to better their health is a valuable community service they should also be able to provide. Research supports this: pharmacist providing smoking cessation counseling and prescribing medications has been shown to be effective and improve access to medicines.<sup>iii,iv</sup>

It is important to meet patients where they are in the community, and supporting HB28 and allowing pharmacists to prescribe NRT with appropriate guidelines is a way to do that.

***The Maryland Public Health Association (MdPHA) is a nonprofit, statewide organization of public health professionals dedicated to improving the lives of all Marylanders through education, advocacy, and collaboration. We support public policies consistent with our vision of healthy Marylanders living in healthy, equitable, communities. MdPHA is the state affiliate of the American Public Health Association, a nearly 145-year-old professional organization dedicated to improving population health and reducing the health disparities that plague our state and our nation.***

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<sup>i</sup> Walton, K., Wang, T. W., Schauer, G. L., Hu, S., McGruder, H. F., Jamal, A., & Babb, S. (2019). State-Specific Prevalence of Quit Attempts Among Adult Cigarette Smokers—United States, 2011–2017. *Morbidity and Mortality Weekly Report*, 68(28), 621.

<sup>ii</sup> Babb, S. (2017). Quitting smoking among adults—United States, 2000–2015. *MMWR. Morbidity and mortality weekly report*, 65.

<sup>iii</sup> Anderson, L., Hartung, D. M., Middleton, L., & Rodriguez, M. I. (2019). Pharmacist provision of hormonal contraception in the Oregon Medicaid Population. *Obstetrics & Gynecology*, 133(6), 1231-1237.

<sup>iv</sup> Carson-Chahhoud, K. V., Livingstone-Banks, J., Sharrad, K. J., Kopsaftis, Z., Brinn, M. P., To-A-Nan, R., & Bond, C. M. (2019). Community pharmacy personnel interventions for smoking cessation. *Cochrane Database of Systematic Reviews*, (10).

<sup>v</sup> O'Reilly, E., Frederick, E., & Palmer, E. (2019). Models for pharmacist-delivered tobacco cessation services: a systematic review. *Journal of the American Pharmacists Association*.